

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

FIGURE NO. _____
APPENDANT(S) _____

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS								
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1														
2		1													
3		1													
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TOTAL DEP.	16														
TOTAL CLAIMS	17														
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